

● PRINTER RUSH ●

(PTO ASSISTANCE)

Application : <u>10/734,507</u>	Examiner : <u>Payer</u>	GAU : <u>3724</u>
From : <u>PAP</u>	Location : <u>(IDC) FMF FDC</u>	Date : <u>9/28/05</u>
Tracking #: <u>EPM 10/734,507</u>		Week Date: <u>7/25/05</u>

DOC CODE	DOC DATE	MISCELLANEOUS
<input type="checkbox"/> 1449	_____	<input type="checkbox"/> Continuing Data
<input type="checkbox"/> IDS	_____	<input type="checkbox"/> Foreign Priority
<input checked="" type="checkbox"/> CLM	<u>6/30/05</u>	<input type="checkbox"/> Document Legibility
<input type="checkbox"/> IIFW	_____	<input type="checkbox"/> Fees
<input type="checkbox"/> SRFW	_____	<input checked="" type="checkbox"/> Other NOA <u>7/22/05</u>
<input type="checkbox"/> DRW	_____	
<input type="checkbox"/> OATH	_____	
<input type="checkbox"/> 312	_____	
<input type="checkbox"/> SPEC	_____	

[RUSH] MESSAGE: Please verify before and after which occurrence of the word "path" the amendments to original claim 34 should be applied. There are two occurrences.

Thank you.

[XRUSH] RESPONSE: _____

INITIALS: _____

NOTE: This form will be included as part of the official USPTO record, with the Response document coded as XRUSH.
REV 10/04